

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | DATE | DATE     |
|---------------------------|----------|------|----------|
| FEE DETERMINATION         |          |      |          |
| O.I.P.E. CLASSIFIER       |          |      |          |
| FORMALITY REVIEW          | FR       | 10/8 | 4-20-01  |
| RESPONSE FORMALITY REVIEW | He       | 7/2  | 5/02/01  |
|                           |          |      | 06-11-01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date     |
|----------------|----------|
| Final Original |          |
| 1              | 08/01/01 |
| 2              | 03/02/01 |
| 3              | 03/02/01 |
| 4              | 03/02/01 |
| 5              | 03/02/01 |
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| Claim          | Date |
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| Claim          | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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